

Post-training survey to assess experiences with SHARE training:

Today's date: _____

Your name (please print legibly): _____

Please list your email address: _____

1. Now that you have received the SHARE Approach training, how confident are you in your understanding of what shared decision-making is?

- Not at all confident
- Slightly confident
- Somewhat confident
- Fairly confident
- Completely confident

2. Now that you have received the SHARE Approach training, how confident are you in your ability to engage in shared decision-making with your patients?

- Not at all confident
- Slightly confident
- Somewhat confident
- Fairly confident
- Completely confident

3. Now that you have received the SHARE Approach training, how often do you think you will engage in shared decision-making with your patients?

- Almost always
- Often
- Sometimes
- Rarely
- Never

4. Now that you have received SHARE Approach training, how often do you think patients' preferences should be taken into account when making clinical decisions?

- Almost always
- Often
- Sometimes
- Rarely
- Never

Evaluation of SHARE Training:

5. Do you think that the SHARE Approach training will be useful for your daily practice?

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

6. Do you think that the SHARE Approach training will improve your ability to engage in shared decision making with your patients?

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

7. Overall, what was your experience of the training that you received today?

- Very positive
- Somewhat positive
- Neutral
- Somewhat negative
- Very negative

8. What part of the training did you find to be the MOST valuable?

9. What part of the training did you find to be the LEAST valuable?

10. What suggestions do you have for improving the SHARE Approach training?
